

District Board Membership			
Designated Meeting Date, Time, & Place _____			
President/Chair:		Term Expires (Mo/Day/Yr):	
P. O. Box/Street		First Full Term Second Full Term Third or more Full Term Filling Unexpired Term	
City:			
Zip Code:			
Telephone:			
Vice President:			Term Expires (Mo/Day/Yr):
P. O. Box/Street		First Full Term Second Full Term Third or more Full Term Filling Unexpired Term	
City:			
Zip Code:			
Telephone:			
Secretary:			Term Expires (Mo/Day/Yr):
P. O. Box/Street		First Full Term Second Full Term Third or more Full Term Filling Unexpired Term	
City:			
Zip Code:			
Telephone:			
Treasurer:			Term Expires (Mo/Day/Yr):
P. O. Box/Street		First Full Term Second Full Term Third or more Full Term Filling Unexpired Term	
City:			
Zip Code:			
Telephone:			
Member:			Term Expires (Mo/Day/Yr):
P. O. Box/Street		First Full Term Second Full Term Third or more Full Term Filling Unexpired Term	
City:			
Zip Code:			
Telephone:			

Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
	Second Full Term	
City:	Third or more Full Term	
	Filling Unexpired Term	
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
	Second Full Term	
City:	Third or more Full Term	
	Filling Unexpired Term	
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
	Second Full Term	
City:	Third or more Full Term	
	Filling Unexpired Term	
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
	Second Full Term	
City:	Third or more Full Term	
	Filling Unexpired Term	
Zip Code:		
Telephone:		
Member:	Term Expires (Mo/Day/Yr):	
P. O. Box/Street	First Full Term	
	Second Full Term	
City:	Third or more Full Term	
	Filling Unexpired Term	
Zip Code:		
Telephone:		